FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C 20549

FORM D 001 1 7 2002

OMB Number:

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OMB Approval

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE	ONLY
Prefix	Serial
DATE RE	CEIVED

	\
Name of Offering (D check if this is an amendment and name has changed, and indicate change.) HAGGIN MARKETING, INC. Common Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	4(6) 🛘 ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Haggin Marketing, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Three Harbor Drive 2nd Floor, Sausalito CA 94965	Telephone Number (Including Area Code) (415) 461-6700
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Direct Marketing	
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	other (please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual C Estimated VCESSED
CN for Canada; FN for other foreign jurisdiction)	©
GENERAL INSTRUCTIONS	THOMSON
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or S 77d(6).	ection 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and That have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice consistues a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers;
 and

 Each general and man 	naging	partner of p	artnership issuers.	4		
Check Box(es) that Apply:	- 12	Promoter	Beneficial Owner	■ Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, i JEFFREY HAGGIN		vidual)				
Business or Residence Addre						
Check Box(es) that Apply:		Promoter	Beneficial Owner	Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, i MICHAEL WYCHOK		vidual)				
Business or Residence Addre Three Harbor D	ss (Nu rıv	mber and S e 2nd 1	treet, City, State, Zip Coo Floor, Sausal:	le) Lto CA 94965	,	
Check Box(es) that Apply:		Promoter	☑ Beneficial Owner	Executive Officer	Director	☐General and/or Managing Partner
Full Name (Last name first, i INGE MORASCINI	if indiv	vidual)				
Business or Residence Addre	ess (Nu	imber and S e 2nd 1	treet, City, State, Zip Coo Floor, Sausal	le) ito CA 94965		
Check Box(es) that Apply:		Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)	* * * * * * * * * * * * * * * * * * * *			
Business or Residence Addre	ess (Ni	ımber and S	treet, City, State, Zip Coo	le)		
Check Box(es) that Apply:		Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)				
Business or Residence Addre	ess (N	umber and S	treet, City, State, Zip Coo	ie)		
Check Box(es) that Apply:		Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)				
Business or Residence Addre	ess (N	umber and S	treet, City, State, Zip Coo	de)		
Check Box(es) that Apply:		Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)				
Business or Residence Address	ess (N	umber and S	treet, City, State, Zip Co	de)		

B. INFORMATION ABOUT OFFERING										
1. Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offering?	Yes No.									
Answer also in Appendix, Column 2, if filing under ULOE.										
•• • • • • •	§ 12,250									
2. What is the minimum investment that will be accepted from any individual?										
3. Does the offering permit joint ownership of a single unit?	Yes No 5 2 □									
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.										
Full Name (Last name first, if individual) NONE										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Name of Associated Broker or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	· · · · · · · · · · · · · · · · · · ·									
(Check "All States" or check individual States)	es									
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NH] [NY] [NC] [ND] [OH] [OK] [OR] [PA]										
[RI] [SC] [SD] [TX] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Name of Associated Broker or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers										
(Check "All States" or check individual States)	es .									
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[RI] [SC] [SD] [TN] [TX] [UT] [VA] [WA] [WV] [WI] [WY] [PR]										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Name of Associated Broker or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	25									
(Check "All States" or check individual States)	LS									
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(Use blank sheet, or copy and use additional coopies of this sheet, as necessary) 3 of 8

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

alrea ing,	the aggregate offering price of securities included in this offering and the total amount ady sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offercheck this box \square and indicate in the column below the amounts of the securities of-				
ferec	for exchange and already exchanged.				•
	Type of Security	Aggreg Offering		Am	Sold
	Debt	\$0		\$	0
	Equity	\$ <u>50,0</u>	00_	\$	50,000
- Tilling	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$ <u> </u>		\$	0
	Partnership Interests	\$ <u>0</u>		\$	0
	Other (Specify)	\$ <u>0</u>		\$	0
	Total	\$ <u>50,0</u>	00_	\$:	50,000
this 504,	the number of accredited and non-accredited investors who have purchased securities in offering and the aggregate dollar amounts of their purchases. For offerings under Rule indicate the number of persons who have purchased securities and the aggregate dollar unt of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
Dhala		Numl Invest		Do	Aggregate llar Amount
がいまたはる	A Party of	3			Purchases
	Accredited Investors.	3			50,000
	Non-accredited Investors.			\$	0
	Total (for filings under Rule 504 only)			\$_:	50,000
-	Answer also in Appendix, Column 4, if filing under ULOE				
secu mon	s filing is for an offering under Rule 504 or 505, enter the information requested for all urities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) this prior to the first sale of securities in this offering. Classify securities by type listed art C-Question 1.				
	Type of offering	Type		Do	llar Amount
	D 1 505	Secur	ity	Φ.	Sold
	Rule 505	0		\$_	0
	Regulation A	0		\$_	0
	Rule 504	0_		\$	0
	Total	0		\$	
secu iššu	arnish a statement of all expenses in connection with the issuance and distribution of the arities in this offering. Exclude amounts relating solely to organization expenses of the er. The information may be given as subject to future contingencies. If the amount of an enditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$_	0
	Printing and Engraving Costs			\$_	0
-pridibilia.	Legal Fees			\$_	0
	Accounting Fees			\$_	0
	Engineering Fees			\$_	0
	Sales Commissions (Specify finder's fees separately)			\$_	0
	Other Expenses (identify)			\$_	0
	Total		П	\$	-0-

C. (OFFERING PRICE, NUMB	ER OF INVESTORS, EX	PENSES.	ANI) USI	E OF	PR	OCEED	S
Que	nter the difference between the aggregation 1 and total expenses furnished in a "adjusted gross proceeds to the issu	response to Part C-Question 4.a. Th	nis difference				\$50	0,000	
used an e mus	for each of the purposes shown. If the stimate and check the box to the left of equal the adjusted gross proceeds to the delay.	e amount for any purpose is not kn f the estimate. The total of the pay	own, furnish ments listed						
				Di	yments Officers rectors, Affiliate	, &	Pa	nyments To Others	
	Salaries and fees		🗖	\$	0		\$	0	
	Purchase of real estate	•••••		\$	0	_ 🗆	\$	0	
	Purchase, rental or leasing and install	ation of machinery and equipment.		\$	0	🗆	\$	0	
e sanes	Construction or leasing of plant buil	dings and facilities		\$	0	_ 🗆	\$_	0	
	Acquisition of other businesses (include offering that may be used in exchange pursuant to a merger	for the assets or securities of another	er issuer	\$	0	🗆	\$_	0	
	Repayment of indebtedness		🗖	\$	0	□	\$ _	0	
raguse.	Working capital		🗖	\$	0	_ 🗆		0,000	
	Other (specify)			\$	0	🗆	\$_	0	
			 	\$	0	🗆	\$	0	
	Column Totals			\$	0	_ 0	\$ <u>5</u>	0,000	
	Total Payments Listed (column tota	ls added)			[3 \$ <u>5</u> (0,0	00	
		D. FEDERAL SIGNATU	JRE						
follöwir	ter has duly caused this notice to be sign as signature constitutes an undertaking of its staff, the information furnished by	by the issuer to furnish to the U.S.	Securities and	d Exc	hange	Comm	issior	ı, upon writ	
	Print or Type) GGIN MARKETING, INC.	Signature HALL		Dat	e 2/5/	101			
Name ^e o	f Signer (Print or Type)	Title of Signer (Print or Type)		1	- 1				
JEF	FREY HAGGIN	PRESIDENT							
		<u>L</u>					_		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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	E. STATE SIGNATURE	
		Yes No
See Appe	endix, Column 5, for state response.	
		filed, a notice or
3. The undersigned issuer hereby undertakes issuer to offerees.	to furnish to the state administrators, upon written request, information	furnished by the
Limited Offering Exemption (ULOE) of	of the state in which this notice is filed and understands that the issue	
The issuer has read this notification and know undersigned duly authorized person.	ws the contents to be true and has duly caused this notice to be signed on i	ts behalf by the
Issuer (Print or Type)	Signature by A O I have Date	
1. Is any party described in 17 CFR 230.252 (c), (d), (e) or (f) presently subject to any of the disqualification Yes provisions of such rule? See Appendix, Column 5, for state response. 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notificant form D (17 CFR 239.500) at such times as required by state law. 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished to issuer to offerees. 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Un Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claimin availability of this exemption has the burden of establishing that these conditions have been satisfied. The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by undersigned duly authorized person. Issuer (Print or Type) Signature Date 2/5/01 Name of Signer (Print or Type) Title of Signer (Print or Type)		
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
JËFFREY HAGGIN	PRESIDENT	

Instruction:

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Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3			4		5	;
•	non-ac inves	to sell to credited tors in ate	Type of security and aggregate offering price offered in state	. a	Type of investor and amound purchased in State				
ļ	(Part B	-Item 1)	(PartC-Item 1)		(Part	C-Item 2)		waiver a	
				Number of Accredited		Number of Nonaccredited			
State	Yes	No		Investors			Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
CO									
CT									
DE					L				J
DC									
FL									
GA									
HI									
ID		i		!					
IL									
IN									
IA				· · · · · · · · · · · · · · · · · · ·					
KS									
KY									
LA									
ME									
MD									
MA									
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APPENDIX

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1		2	3	,		4		Disqual	ification
	non-ac inves St	to sell o credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (PartC-Item 1)		Type of investor and amound purchased in State (Part C-Item 2)				
				Number of Accredited		Number of Nonaccredited	'		
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
MT				· · · · · · · · · · · · · · · · · · ·					
NE									
NV							•		
-NH			·						
NJ							×		
NM									
NY									
NC									
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